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Bib Data Sheet

CONFIRMATION NO. 2832

SERIAL NUMBER 10/633,377	FILING DATE 08/04/2003 RULE	CLASS 005	GROUP ART UNIT 3673	ATTORNEY DOCKET NO.
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APPLICANTS

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** CONTINUING DATA *****
none R.S.

** FOREIGN APPLICATIONS *****
none R.S.

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 04/16/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after <i>Allowance</i> <i>Robert G. S.</i> Examiner's Signature Initials	STATE OR COUNTRY UT	SHEETS DRAWING 5	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 3
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TITLE
 Infant reflux mattress suspense system and bed

FILING FEE RECEIVED 384	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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